

## NDP022: RETROPERITONEAL LAPAROSCOPIC RESECTION OF NEUROGENIC TUMOR

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**Purpose:** Retroperitoneal laparoscopic resection of retroperitoneal tumor can be challenging due to variations in location, size, and tumor characteristics. We would like to share our experience in retroperitoneoscopic surgery for neurogenic tumor and the experience of using intra-operative neuromonitoring technique.

**Materials and Methods:** Between June 2014 and December 2015, retroperitoneal laparoscopic resection of retroperitoneal tumor was performed on 10 patients. Three of the 10 patients were pathologically proved Schwannoma. Others include metastatic malignant melanoma, leiomyosarcoma, liposarcoma, cystic lymphangioma, hemangioma, adrenal cortical carcinoma, and pheochromocytoma. Among three patient with Schwannoma, intraoperative neuromonitoring was used in two patients for pre-operative image suggest possible neurogenic tumor. One patient underwent resection of two tumors at the same time.

**Results:** The median tumor diameter was 6.75 cm (range 4–12). The tumor location: two embedded on right psoas muscle with right L3 root compression, one at lower pole of right kidney with right psoas muscle adhesion, one at retrocaval region. All of the tumors were approached retroperitoneally. The median operative time was 206 min (range 120–300) and blood loss was 33 mL (range 0–100). No patient required blood transfusion. One patient receiving robotic assisted surgery had a conversion to traditional laparoscopic surgery because of malposition of the robot. Pathological examination revealed all schwannoma in 3 cases. During follow-up, there was no tumor recurrence noted.

**Conclusion:** Retroperitoneal laparoscopic resection of neurogenic tumor is a feasible choice. Combining intraoperative neuromonitoring, we can decrease the risk of neurological complication. When dealing with tumor next to great vessel or location hard to approach, pre-operative planning is necessary.

## NDP023: MULTILOCLAR CYSTIC NEPHROMA: A CASE REPORT AND REVIEW OF THE LITERATURE

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Cystic nephroma is a relative rare benign renal lesion with a bimodal age distribution. Diagnostic peaks occur primarily in the first 2 to 3 years of life, and again in the forty to fifty years. They are usually incidentally found as an asymptomatic abdominal mass. Radiologically, it is difficult to differentiate between cystic nephroma and cystic RCC in adults. The exact diagnosis primarily depends on the histopathologic examination. We present a 28 year-old male patient with a symptomatic, incidentally found left complicated renal cyst. A laparoscopic partial nephrectomy was performed on this patient. Microscopically, the tumor composed of variable-sized cysts lined by a layer of flattened or cuboidal cells with a confirmed histological diagnosis of cystic nephroma. The literatures were reviewed.

## NDP024: METANEPHRIC ADENOMA OF THE KIDNEY – A CASE REPORT AND LITERATURE REVIEW

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**Purpose:** Metanephric adenoma (MA) is a rare neoplasm. It's benign renal neoplasm originating in the epithelial cells of the kidney. Most tumors are asymptomatic, and incidentally discovered during examinations for other problems. It is difficult to distinguish metanephric adenoma from malignant neoplasms by image. It is often diagnosed by pathological report after surgical treatment. The present study reports the case of a 45-year-old female that presented with metanephric adenoma.

**Materials and Methods:** A 45 years-old female had small renal mass over left kidney during evaluation of pancreas mass. Physical examination revealed no significant finding. Computerized tomography (CT) and Magnetic resonance imaging (MRI) revealed a neoplasm lesion localized in the left kidney without lymphadenopathy. Left partial nephrectomy was performed on December 23, 2015. Microscopic finding composed of monotonous tumor cells with few light pink cytoplasm, small, uniform nuclei and inconspicuous nucleoli, arranged in solid sheets, small acini, and papillary structure. Hyalinized stroma with focal calcification are also noted. The tumor cells are immunoreactive for Wilms' tumor antigen (WT1). The final pathological report revealed metanephric adenoma.

**Results:** According the literature review, Metanephric adenoma (MA) is a rare benign tumor that accounts for 0.2–0.7% of adult renal epithelial neoplasms. <200 cases have been reported in the literature. Peak age of MA was in the fifth or sixth decade of life. Most tumors are incidentally finding. Some patient will have flank pain, hematuria and palpable mass. Lab data may reveal polycythemia. MA cannot be easily distinguished from other malignant neoplasms using imaging alone. Macroscopic, MA appears as a well-defined, round, solid, soft mass varying in size. Microscopic, MA expresses CK7 and WT1 and does not express epithelial membrane antigen or AMACR. Radical or partial nephrectomy may indicate for treatment due to the risk of malignancy without pathology.

**Conclusion:** Metanephric adenoma is a rare benign tumor. It cannot be easily distinguished from malignant neoplasms of kidney by imaging. Metanephric adenoma can recognized by microscopy. Surgical intervention is suggested due to diagnosis is challenging without pathology.

## NDP025: PRIMARY LARGE CELL NEUROENDOCRINE CARCINOMA OF THE KIDNEY WITH COEXISTING HIGH-GRADE UROTHELIAL CARCINOMA AND VIRCHOW'S NODE METASTASIS: A CASE REPORT AND LITERATURE REVIEW

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Primary large cell neuroendocrine carcinomas of the kidney are extremely rare, and distant metastases are scarcely reported. Here, we report a case of a 68-year-old man who presented with hematuria and was found to have an enlarged neck mass and a huge mass at the left kidney. Radical nephroureterectomy with bladder cuff excision and paraaortic lymphadenectomy was performed. A diagnosis of primary large cell neuroendocrine carcinoma with coexisting high-grade urothelial components was rendered. Besides, the fine-needle aspiration cytology reported neuroendocrine metastasis. In this report, the clinical, cytological, histological, and immunohistochemical features of this case are described, and a review of the literature about this neoplasm is presented.

## NDP026: MALIGNANT GLOMUS TUMOR OF KIDNEY – A CASE REPORT

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**Purpose:** Glomus tumors are mesenchymal neoplasms that resemble normal glomus body. Glomus tumors most often occurred in the